

Multi-Platform International Open Pension - Form B - Contribution Form

Full Name

Member Number

1. Regular contributions (if applicable) - Please complete a Standing Order Instruction (Form D)

	Name	Amount	Frequency (<i>please circle</i>)	
Personal (from your account)		£/€/ \$	Monthly Half-yearly	Quarterly Annual
Personal (deducted from salary) (complete section 4)		£/€/ \$	Monthly Half-yearly	Quarterly Annual
Employer (complete section 4)		£/€/ \$	Monthly Half-yearly	Quarterly Annual
Third party (complete section 5)		£/€/ \$	Monthly Half-yearly	Quarterly Annual

2. Single contributions

	Name	Amount
Personal (from your account)		£/€/ \$
Personal (deducted from salary) (complete section 4)		£/€/ \$
Employer (complete section 4)		£/€/ \$
Third party (complete section 5)		£/€/ \$

3. Source of Wealth

Occupation / nature of business

Annual earnings / net annual turnover

£/€/ \$

Source of funds for the investments
(e.g. a UK bank account)

4. Employer's Declaration (if applicable)

I/We confirm that:

- I/We will deduct the necessary employee contributions from the Applicant's salary after tax and National Insurance have been deducted as they become due and send this to London & Colonial.
- I/We agree to pay the contributions detailed above until further notice and will inform London & Colonial of any changes to the amounts due.
- I/We agree to advise London & Colonial immediately if any member is to leave our employment. Unless otherwise agreed in writing, we confirm that employer contributions will only be paid in respect of people currently employed and will cease if the member leaves employment.
- I/We understand that London & Colonial will aim to verify the identity of the company electronically to satisfy anti-money laundering regulations. In the event that London & Colonial are unable to do this, they will request documentary evidence as an alternative. London & Colonial will delay applications until sufficient identification has been provided.

Signed

Position

Name (*block capitals*)

Employer

Date

5. Third party Declaration – for Third party contributions ONLY

I/We confirm that:

- I/We agree to pay the contributions detailed above until further notice and will inform London & Colonial of any changes to the amounts due.
- I/We understand that London & Colonial will aim to verify the identity of the third party electronically to satisfy anti-money laundering regulations. In the event that London & Colonial are unable to do this, they will request documentary evidence as an alternative. London & Colonial will delay applications until sufficient identification has been provided.

Signed	<input type="text"/>
Full name (<i>block capitals</i>)	<input type="text"/>
Capacity	<input type="text"/>
Date of birth (<i>if individual</i>)	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
Name of company (<i>if applicable</i>)	<input type="text"/>
Address line one	<input type="text"/>
Address line two	<input type="text"/>
Town	<input type="text"/>
County	<input type="text"/>
Country / Postcode	<input type="text"/> <input type="text"/>

6. Payment Method

Single contribution	<input type="checkbox"/> Electronic Transfer
	<input type="checkbox"/> Cheque
	<input type="checkbox"/> Contribution In Specie (<i>please provide asset details separately</i>)

Regular contributions	<input type="checkbox"/> Standing Order instruction (<i>Form E</i>)
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7. Start date for regular contributions

<input type="checkbox"/> ASAP	OR	Date	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
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Please complete a Standing Order Instruction (Form D) for each regular payment.

Signed	<input type="text"/>	Date	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
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